

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10921041
APPLICANT(S)

FILING DATE 04/10/10

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2		1		1		1
3		2		2		2
4		2				
5		2		4		4
6		1		4		4
7		1		1		1
8		1				
9		1				
10		2				
11		2				
12		1				
13		1				
14						
15	1		1			
16		1		1		
17	1					
18		3				
19		3				
20		3				
21		1		1		
22		1		2		
23	1		1		1	
24		1		1		1
25		2		2		2
26		2		2		2
27		1		1		1
28		①		1		1
29				1		1
30				1		1
31				1		1
32					1	
33						1
34						1
35						1
36						1
37						1
38						6
39						6
40						1
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	4		3		3	
TOTAL DEP.	37		26		40	
TOTAL CLAIMS	41		29		43	

	IND	DEP	IND	DEP	IND	DEP
51						
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						